



Independent Mental Capacity Advocacy (IMCA) Service 2013-14: Summary

Advocacy gives the most vulnerable members of society a voice.

Advocates are independent and represent the views and wishes of the individual without judgement or bias. Depending on the individual this may mean empowering and enabling them to communicate their wishes or it may mean speaking on their behalf.

Advocates play a vital role in ensuring the individual's best interests are at the heart of every decision.

Best Interests Decisions

Under the Mental Capacity Act (2005) it must be assumed that a person can make their own decisions unless it can be shown otherwise. If a person is unable to make a decision themselves then a best interests decision should be made on their behalf. When making a best interests decision, every effort should be made to consult with the person's friends, family, carers and anyone with a positive interest in the individual's well-being. The decision must take into account the person's wishes and feelings and should always seek to maximise the person's freedom of movement and choice.

13,301 Independent Mental Capacity Advocate (IMCA) referrals in 2013/14 – up 10% from 2012/13

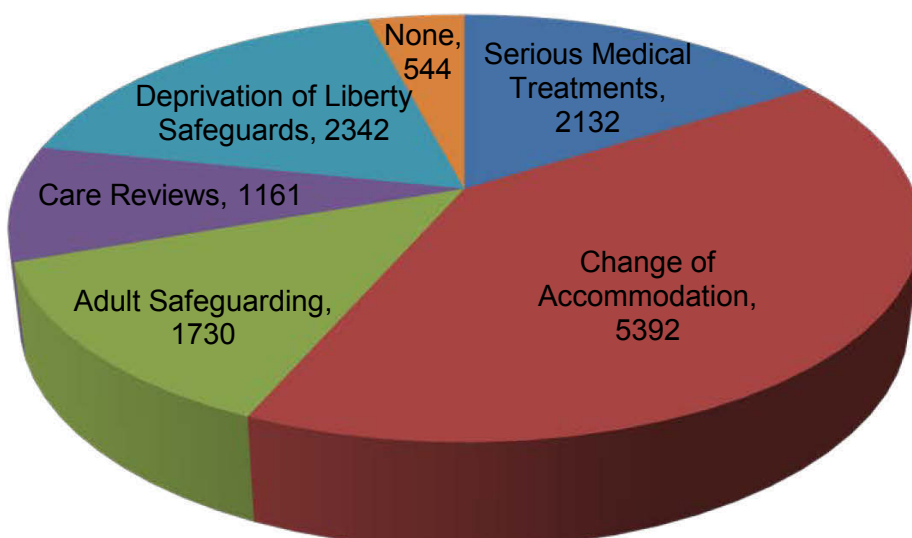
17% of Deprivation of Liberty Safeguard (DoLS) cases involved an IMCA

7% of adult safeguarding cases, where the individual lacked capacity, involved an IMCA

64% of referrals were for over 65s

42% of referrals related to people with dementia

Referrals by Decision Type



Key Observations

CAPACITY TO CONSENT -

It's important that a person's capacity to make decisions about their treatment is considered and an IMCA appointed if appropriate.

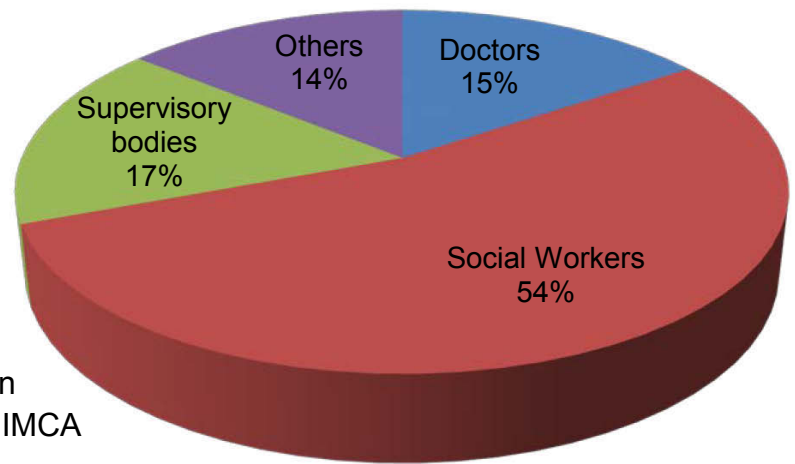
CARE PLANS- If a person lacks capacity their lack of objection to existing arrangements should not mean that care plans are not scrutinised. An IMCA should be appointed if appropriate.

DISCHARGE PLANNING- It is important that accommodation decisions are considered early in hospital stays to avoid delays at discharge.

RIGHT TO APPEAL- If a person who lacks capacity wishes to appeal against a DoLS authorisation then they should be supported to do so even if the Relevant Person's Representative feels the DoLS is in their best interests.

SAFEGUARDING - Half of the people who lacked capacity did not have any support from an advocate, family member or friend during the safeguarding referral.

Referrals by Decision Maker



Recommendations

- That IMCAs and MCA leads in hospitals work to build links and improve awareness of the MCA and the IMCA service among clinicians.
- Responsible bodies should ensure that they have a documented policy on when safeguarding cases should be referred to an IMCA. They should revisit the criteria within the policy to ensure that those who would benefit from an advocate have the opportunity to do so. In particular, consideration should be given to cases where there is no appropriate family member or friend to support a person who lacks capacity.
- All local authorities should review their processes and procedures for providing IMCA support to unpaid Relevant Person's Representatives to ensure that the right people are given access to this valuable service.
- All IMCA providers should review the draft guidance on training and development, provided with this report, and consider how it could be implemented in their organisation. Commissioners should also consider training standards when reviewing contracts.